Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 1 of 53

B1 (Official)	Form 1)(04					oannon		go <u> </u>					
			United No			ruptcy of Illino					Vo	luntary Petitio	on
	ebtor (if ind lark Holli		er Last, First,	Middle):			Name	of Joint De	ebtor (Spouse)) (Last, First	, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):							
Last four dig	e, state all)	Sec. or Indi	vidual-Taxpa	yer I.D. (ITIN)/Com	plete EIN	Last for	our digits o	f Soc. Sec. or	Individual-	Гахрауег I	D. (ITIN) No./Complet	te EIN
Street Addre	ess of Debto	*	Street, City, a	and State)	:	am a i		Address of	Joint Debtor	(No. and St	reet, City, a	,	
					Г	ZIP Code 61081						ZIP C	ode
County of R		of the Prin	cipal Place o	f Business		01001	Count	y of Reside	ence or of the	Principal Pla	ace of Busi	ness:	
Mailing Add	dress of Deb	otor (if diffe	rent from str	eet addres	ss):		Mailir	ng Address	of Joint Debto	or (if differe	nt from str	eet address):	
					Г	ZIP Code						ZIP C	lode
Location of I													
(Form	• •	f Debtor	one how)			of Business			-	•	•	Under Which	
(Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)			(Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as def in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank			defined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	of Cl	hapter 15 F a Foreign hapter 15 F	Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding		
	Chapter 1	15 Debtors		Oth							e of Debts		
Country of de Each country by, regarding	in which a fe	oreign procee	eding	Tax-Exempt Entity (Check box, if applicable) □ Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			e) zation tates	defined "incurr	are primarily co I in 11 U.S.C. § ed by an indivional, family, or l	nsumer debts, 101(8) as dual primarily	for	☐ Debts are primaril business debts.	-
	Fi	ling Fee (C	heck one box	<u>.</u> ;)		Check	one box:	1	Chap	ter 11 Debt	ors		
attach sign debtor is u Form 3A.	e to be paid ir ned application unable to pay	n installments on for the cou fee except in	(applicable to art's considerat a installments.	ion certifyi Rule 1006(ng that the (b). See Office	ial Check	Debtor is not if: Debtor's agg	a small busing regate nonco \$2,490,925 (efined in 11 U	J.S.C. § 101 cluding debt		
attach sign	ned application	on for the cou	able to chapter art's considerat			BB. 🗖 1	Acceptances	of the plan w	this petition. were solicited pros.C. § 1126(b).	epetition from	one or mor	e classes of creditors,	
Debtor e	estimates that estimates that	at funds will at, after any	ation I be available exempt prop for distribut	erty is ex	cluded and	administrat		es paid,		THIS	SPACE IS	FOR COURT USE ONLY	
Estimated No.	umber of C 50- 99	reditors 100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated As	ssets \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Li \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000		\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main

Document Page 2 of 53

B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Cripe, Mark Hollis (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). X /s/ Megan G. Heeg ☐ Exhibit A is attached and made a part of this petition. February 6, 2015 Signature of Attorney for Debtor(s) (Date) Megan G. Heeg Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Mark Hollis Cripe

Signature of Debtor Mark Hollis Cripe

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

February 6, 2015

Date

Signature of Attorney*

X /s/ Megan G. Heeg

Signature of Attorney for Debtor(s)

Megan G. Heeg

Printed Name of Attorney for Debtor(s)

Ehrmann Gehlbach Badger Lee & Considine, LLC

Firm Name

215 E. First Street P.O. Box 447 Dixon, IL 61021

Address

Email: heeg@egblc.com

815-288-4949 Fax: 815-288-3068

Telephone Number

February 6, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Cripe, Mark Hollis

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 4 of 53

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	Mark Hollis Cripe		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 5 of 53

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
mental deficiency so as to be incapable of refinancial responsibilities.); □ Disability. (Defined in 11 U.S.C. §	§ 109(h)(4) as impaired by reason of mental illness or alizing and making rational decisions with respect to § 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or combat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Mark Hollis Cripe
	Mark Hollis Cripe
Date: February 6, 20	<u>115</u>

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 6 of 53

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Mark Hollis Cripe		Case No.		
_	·	Debtor ,			
			Chapter	7	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	7,974.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		22,767.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		6,005.04	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	9		88,469.79	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	2			
I - Current Income of Individual Debtor(s)	Yes	2			1,429.83
J - Current Expenditures of Individual Debtor(s)	Yes	2			1,387.17
Total Number of Sheets of ALL Schedu	ıles	25			
	T	otal Assets	7,974.00		
			Total Liabilities	117,241.83	

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 7 of 53

B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Mark Hollis Cripe		Case No.	
_		Debtor	,	
			Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	4,400.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	1,605.04
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	6,005.04

State the following:

Average Income (from Schedule I, Line 12)	1,429.83
Average Expenses (from Schedule J, Line 22)	1,387.17
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	1,780.83

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		16,767.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	1,455.68	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		4,549.36
4. Total from Schedule F		88,469.79
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		109,786.15

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 8 of 53

B6A (Official Form 6A) (12/07)

In re	Mark Hollis Cripe	Case No	
-	<u>.</u>	, Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 9 of 53

B6B (Official Form 6B) (12/07)

In re	Mark Hollis Cripe	Case No.	
_		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	On person	-	12.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking account at Fifth Third	-	62.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	36" TV (\$300); leather chair (\$100); Bed (\$100); Dresser (\$50); Desk and 2 lamps (\$95); end table (\$20), and other misc. household goods.	-	665.00
5.	Books, pictures and other art	Framed Olympic pins	-	150.00
	objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Books, ceramic vases and bowls	-	180.00
6.	Wearing apparel.	Normal complimentary clothing for middle aged man.	-	250.00
7.	Furs and jewelry.	Gucci watch, ring and misc jewlery	-	50.00
8.	Firearms and sports, photographic, and other hobby equipment.	Bicycle (\$50), antique flyer sled (\$40)	-	90.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	х		
10.	Annuities. Itemize and name each issuer.	х		

Sub-Total >	1,459.00
(Total of this page)	

² continuation sheets attached to the Schedule of Personal Property

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 10 of 53

B6B (Official Form 6B) (12/07) - Cont.

In	re Mark Hollis Cripe			Case N	lo	
			Debtor			
		SC	CHEDULE B - PERSONAL PROPER (Continuation Sheet)	RTY		
	Type of Property	N O N E			Husband, Wife, Joint, or ommunity	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х				
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X				
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X				
14.	Interests in partnerships or joint ventures. Itemize.	X				
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X				
16.	Accounts receivable.	X				
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.		Potential 2014 federal and state tax refund		-	Unknown
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X				
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

0.00

Sub-Total >

(Total of this page)

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 11 of 53

B6B (Official Form 6B) (12/07) - Cont.

In re	Mark Hollis Cripe	Case No.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2012 Toyota RAV4 (joint with exwife. Ex-wife has possession. She filed her own chapter 7 bankruptcy peition and reaffirmed this debt.)	-	6,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	I	Dell computer	-	400.00
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	(Cat	-	75.00
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	I	Misc. tools (no power tools)	-	40.00

| Sub-Total > 6,515.00 (Total of this page) | Total > 7,974.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 12 of 53

B6C (Official Form 6C) (4/13)

In re	Mark Hollis Cripe	Case No
-	<u> </u>	,

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box) ■ 11 U.S.C. §522(b)(2) □ 11 U.S.C. §522(b)(3)	☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on Hand On person	11 U.S.C. § 522(d)(5)	12.00	12.00
Checking, Savings, or Other Financial Accounts, Checking account at Fifth Third	Certificates of Deposit 11 U.S.C. § 522(d)(5)	62.00	62.00
Household Goods and Furnishings 36" TV (\$300); leather chair (\$100); Bed (\$100); Dresser (\$50); Desk and 2 lamps (\$95); end table (\$20), and other misc. household goods.	11 U.S.C. § 522(d)(3)	665.00	665.00
Books, Pictures and Other Art Objects; Collectible Framed Olympic pins	e <u>s</u> 11 U.S.C. § 522(d)(3)	150.00	150.00
Books, ceramic vases and bowls	11 U.S.C. § 522(d)(3)	180.00	180.00
Wearing Apparel Normal complimentary clothing for middle aged man.	11 U.S.C. § 522(d)(3)	250.00	250.00
Furs and Jewelry Gucci watch, ring and misc jewlery	11 U.S.C. § 522(d)(4)	50.00	50.00
Firearms and Sports, Photographic and Other Hol Bicycle (\$50), antique flyer sled (\$40)	bby Equipment 11 U.S.C. § 522(d)(5)	90.00	90.00
Other Liquidated Debts Owing Debtor Including To Potential 2014 federal and state tax refund	ax <u>Refund</u> 11 U.S.C. § 522(d)(5)	Unknown	Unknown
Office Equipment, Furnishings and Supplies Dell computer	11 U.S.C. § 522(d)(5)	400.00	400.00
Animals Cat	11 U.S.C. § 522(d)(3)	75.00	75.00
Other Personal Property of Any Kind Not Already Misc. tools (no power tools)	<u>Listed</u> 11 U.S.C. § 522(d)(5)	40.00	40.00

T-4-1.	1.974.00	1.974.00
rotai.	1.974.00	1.974.00

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Page 13 of 53 Document

B6D (Official Form 6D) (12/07)

In re	Mark Hollis Cripe	Case No.	
_		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	H W	band, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND	C O N T I	L	S P	AMOUNT OF CLAIM WITHOUT DEDUCTING	UNSECURED PORTION, IF
AND ACCOUNT NUMBER (See instructions above.)	O R	C J	DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	N G E N	I	E	VALUE OF COLLATERAL	ANY
Account No. xxxxxxxx8285			Opened 8/01/12 Last Active 7/17/14] ⊤	A T E D			
Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729	х		2012 Toyota RAV4 (joint with exwife. Ex-wife has possession. She filed her own chapter 7 bankruptcy peition and reaffirmed this debt.)					
		L	Value \$ 6,000.00	_		Н	22,767.00	16,767.00
Account No.			Value \$					
Account No.		Г				П		
			Value \$					
Account No.								
		L	Value \$	1				
continuation sheets attached			(Total of t	Subt his j			22,767.00	16,767.00
			(Report on Summary of So		ota lule		22,767.00	16,767.00

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 14 of 53

B6E (Official Form 6E) (4/13)

In re	Mark Hollis Cripe	Case No	
-		Debtor ,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligation		Domestic	support	obligation
-----------------------------	--	----------	---------	------------

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

■ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Case 15-80295 Document Page 15 of 53

B6E (Official Form 6E) (4/13) - Cont.

In re	Mark Hollis Cripe		Case No.	
_		Debtor	- /	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Domestic Support Obligations

							TYPE OF PRIORITY	•
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	LQU	U	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No. Sue Cripe 48 Paseo Primero Rancho Santa Margarita, CA 92688		-	child support - Obligee realizes Mr. Cripe is unable to afford current child support but she does not want Mr. Cripe to take it back to court and verbally agree to accept \$200 a month until his financial situation improves.		I DATED		4,400.00	4,400.00
Account No.							4,400.00	0.00
Account No.								
Account No.								
Account No.								
Sheet 1 of 2 continuation sheets at	tache	ed to		Sub				4,400.00
Schedule of Creditors Holding Unsecured Pr				his	pag	ge)	4,400.00	0.00

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 16 of 53

B6E (Official Form 6E) (4/13) - Cont.

In re	Mark Hollis Cripe		Case No.	
_		Debtor		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 2012 taxes Account No. **Internal Revenue Service** 149.36 Mail Stop 5010 CHI 230 S. Dearborn St. χЈ Chicago, IL 60604 1,605.04 1,455.68 Account No. Account No. Account No. Account No. Subtotal 149.36 Sheet **2** of **2** continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 1,605.04 1,455.68 Total 4,549.36 (Report on Summary of Schedules) 6,005.04 1,455.68

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 17 of 53

B6F (Official Form 6F) (12/07)

In re	Mark Hollis Cripe	Case No	
_		Debtor ,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	c	Н	usband, Wife, Joint, or Community		U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M		N T I N G E N	L I QU I DAT		AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxx3273			Opened 11/05/96 Credit Card	Ť	T E D	1	
American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355		-					0.00
Account No. xxxxx8040			Opened 4/15/08 Last Active 5/31/13	+	\dagger		
Bank of America Unit/CA6-919-02-41 Po Box 5170 Simi Valley, CA 93062		-	FHA Real Estate Mortgage			x	0.00
Account No. xxxxxx0598 Bank of America N.A. Resurgent Capital Services Box 19034 Greenville, SC 29602		-	overdraft charges				347.19
Account No. xxxxxxxxxxx1206	_		Opened 4/01/11 Last Active 3/04/14	+	+	-	347.19
Best Buy Citicorp Credit Services Centralized Bankruptcy Box 20507 Washington, DC 20507	x	_	Charge Account				1,005.00
_8 continuation sheets attached		<u> </u>	[(Total	Sub of this			1,352.19

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 18 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe	Case No.	
_		Debtor	

	С	Нп	sband, Wife, Joint, or Community	Тс	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	I N G E N	N	S	AMOUNT OF CLAIM
Account No. xxxxxxxxxxx1916			Opened 4/01/02 Last Active 9/25/03	٦т	T E		
Cap1/bstby 1405 Foulk Road Wilmington, DE 19808		-	Charge Account		D		0.00
Account No. xxxxxxxxxxxx6317			Opened 7/01/11 Last Active 1/23/14				0.00
Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130		-	Credit Card				0.00
Account No. xx2116			potential living expenses incurred by now				
Capital 1 Bank Attn: Bankruptcy Dept. Box 30285 Salt Lake City, UT 84130	x	-	ex-wife			x	714,00
Account No. xxxx5167	╁		Opened 6/01/12 Last Active 8/01/13	+			
Cashcall Inc 1 City Blvd W Orange, CA 92868		-	Unsecured				Unknown
Account No. xx0993	\mathbf{l}		2003 medical	+			
Casper Medical Imaging 419 S. Washington Casper, WY 82601		-					335.12
Sheet no1 of _8 sheets attached to Schedule of	_			Subt			1,049.12
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	1,049.12

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 19 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe		Case No.	
_		Debtor		

	_	_					
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	S	U N L	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LQULD	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx2168			Opened 1/01/05 Last Active 10/14/14	Ť	A T E		
Chase 201 N. Walnut St//De1-1027 Wilmington, DE 19801		-	Credit Card		D		344.00
Account No. xxxxxxxx5937			Opened 11/01/93 Last Active 7/21/06			Г	
Chase 201 N. Walnut St//De1-1027 Wilmington, DE 19801		-	Credit Card				0.00
Account No. xxxxxxxx5832	t	T	Opened 1/01/11 Last Active 7/18/13		T		
Chase auto Attn: National Bankruptcy Dept Po Box 29505 Phoenix, AZ 85038		-	Automobile				0.00
Account No. xxxxxxxxxxxx1478			Opened 4/21/01 Last Active 11/12/05			Г	
Chase-pier1 Chase Card Svcs/Attn:Bankruptcy Dept Po Box 15298 Wilmington, DE 19850		-	Credit Card				0.00
Account No. xxxx-xxxx-6111	T		credit card			T	
Citibank USA - Sears LVNV Funding, LLC Box 10497 MS576 Greenville, SC 29603	x	-					10,811.53
Sheet no. 2 of 8 sheets attached to Schedule of	_	<u> </u>		Sub	tota	ıl	44.455.50
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	11,155.53

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 20 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe	Case No	
_		Debtor	

		_			_	_	_
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	LNGEN	Q U	T E	AMOUNT OF CLA
Account No. xxxxx8708			Opened 11/01/04 Last Active 1/12/14	Т	E		
Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218		_	Charge Account		D		0.0
Account No. xxxxxxxxxxxx3872	╁	┢	Opened 8/05/11 Last Active 5/28/14	+	H	H	
Credit One Bank Po Box 98873 Las Vegas, NV 89193		-	Credit Card				
							0.0
Account No. xxxx5167 Delbert Services/consu Rodney Square N 1100 N M Wilmington, DE 18901	-	-	Opened 8/01/13 Last Active 1/28/14 Unsecured				
	╀	Ļ		\perp	L	L	0.0
Account No. xxxxxxxxxxxxx2313 Discoverbank Po Box 15316 Wilmington, DE 19850	-	-	Opened 9/30/98 Last Active 11/03/05 Credit Card			x	X Unknov
Account No. xxx1850	十	\vdash	Opened 1/01/14 Last Active 10/20/14	+		\vdash	
Dowagiac Area Fcu 473 E Division St Dowagiac, MI 49047	-	-	Unsecured			x	X 8,490.0
Sheet no. 3 of 8 sheets attached to Schedule of	_		,	Subt	ota	ıl	9 400 6
Creditors Holding Unsecured Nonpriority Claims			(Total of t	this	pag	ge)	8,490.0

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 21 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe	Case No
_		Debtor

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	Q U I	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxx5420			Opened 12/01/12 Last Active 1/12/14	Ť	T		
Dsnb Macys Po Box 8218 Mason, OH 45040		-	Charge Account		D		0.00
Account No. Fifth Third Bank 5050 Kingsley Drive 1MOB1N Cincinnati, OH 45263	x	-	This debt was incurred by Debtor's brother to pay off a debtor credit card. Debtor does not know if he is also liable.			x	8,671.56
Account No. xxxxxxxxxx4862	┡	┢	Opened 7/19/07 Last Active 10/07/10	+	_	┢	.,.
First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107		-	Credit Card				0.00
Account No. xxx0991			medical incurred by now ex-wife				
GECRB/Care Credit Attn: Bankruptcy Box 103014 Roswell, GA 30076		-				x	466.00
Account No. xxxxxxxxxxx7433			Opened 3/13/05 Last Active 11/11/05			T	
GECRB/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076		-	Charge Account				0.00
Sheet no. 4 of 8 sheets attached to Schedule of	_			Subt	ota	ıl	0.407.70
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	9,137.56

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 22 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe	Case No.	_
_		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CO	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONT_NGENT	UNLLQULDAT	U T F	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6355			Opened 4/07/13 Last Active 1/23/14	1 🕆	T E		
GECRB/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076		-	Charge Account		D		0.00
Account No. xx9279	T		2009 taxes, penalties and interest				
Interal Revenue Service Box 802501 Cincinnati, OH 45280-2501	x	-					4,998.80
Account No. xx9279	┡		0040 (L		4,330.00
Internal Revenue Service Box 802501 Cincinnati, OH 45280-2501	x	-	2010 taxes, penalties and interest				8,991.48
Account No.	T		5/2014 - 8/2014				
John F. Magyar, Esq. 107 Pennsylvania Avenue Box 502 Dowagiac, MI 49047		-	Attorneys fees				871.99
Account No. xxxxxxxxxxxxx9058			Opened 10/01/04 Last Active 1/14/14				
Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051		-	Charge Account				0.00
Sheet no. 5 of 8 sheets attached to Schedule of				Subt	ota	.1	44.000.07
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his _]	pag	ge)	14,862.27

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 23 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe	Case No	
_		Debtor	

	С	Ни	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	NL - QU - DATE	ISPUTE	AMOUNT OF CLAIM
Account No.			Matt Cripe obtained a debt consolidation loan	Т	T E D		
Matt Cripe 26887 Nabour Road Dowagiac, MI 49047		-	to pay off Mark's credit card loans.		D		17,300.00
Account No. xxxxx6827	+		Opened 4/01/08 Last Active 12/31/13				,
Nationstar Mortgage LLC Attn: Bankruptcy 350 Highland Dr Lewisville, TX 75067		-	FHA Real Estate Mortgage				
Account No. xx1465	+		medical expense incurred by now ex-wife				0.00
Outpatient Radiology 419 S. Washington Casper, WY 82601	x	-				x	754.57
Account No. xxxxxxxxxxx5667	\dagger		Opened 7/01/98 Last Active 5/22/03				
Peoples Bk Credit Card Services Attn: Bankruptcy Po Box 7092 Bridgeport, CT 06601		-	Credit Card				0.00
Account No. xxxxxxxxxxxxx5211	1	T	Opened 5/01/13 Last Active 5/01/14	T			
Preferred Customer Account Cscl Dispute Team Des Moines, IA 50306	x	-	Charge Account (Flanigans Furniture Outlet)				2,721.00
Sheet no. 6 of 8 sheets attached to Schedule of	f		<u> </u>	Subt	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	20,775.57

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 24 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe		Case No.	
_		Debtor		

					_	_		
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		C	U N L	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CL IS SUBJECT TO SETOFF, SO STAT	AIM	COZH_ZGEZH	I QUID	.SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx2609			Opened 6/01/88 Last Active 9/20/11		Т	Ă T E		
Wells Fargo Po Box 60510 Los Angeles, CA 90060		-	Check Credit Or Line Of Credit			D		0.00
Account No. xxxxxx0005			Opened 11/01/96 Last Active 12/27/00					
Wells Fargo Card Ser 1 Home Campus 3rd Floor Des Moines, IA 50328		-	Credit Card					0.00
Account No. xxxxxxxxxxxx9729	T		Opened 4/16/13 Last Active 5/08/14					
Wells Fargo Card Services 1 Home Campus 3rd Floor Des Moines, IA 50328	x	-	Credit Card					8,205.00
Account No. xxxxxxxx5477			Opened 7/01/13 Last Active 2/01/14					
Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729		-	Automobile - repossessed					12,965.00
Account No. xxxxxxxx3397			Opened 1/01/10 Last Active 8/17/12					
Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729		-	Automobile					0.00
Sheet no. 7 of 8 sheets attached to Schedule of				S	ubt	ota	l	24 470 00
Creditors Holding Unsecured Nonpriority Claims			(*)	Total of th	is	pag	e)	21,170.00

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 25 of 53

B6F (Official Form 6F) (12/07) - Cont.

In re	Mark Hollis Cripe	Case No.	
_		Debtor	

_		_			_	_		
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	- 6	U	P	'	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	111	DISPUTED	;	AMOUNT OF CLAIM
Account No. xxx4153			medical		A T E D			
Wyoming Medical Center Accelerated Receivables Solutions Box 70 Scottsbluff, NE 69363	x	-			D			477.55
Account No. xxxxxxxxxxx8380	┢	H	Opened 7/06/05 Last Active 1/23/14	+	╁	+	+	
Zales/Sterling Jewelers Attn.: Bankruptcy Po Box 1799 Akron, OH 43309		-	Charge Account					
								0.00
Account No.								
Account No.	ł							
Sheet no. 8 of 8 sheets attached to Schedule of				Sub			T	477.55
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	,	411.33
			(Report on Summary of So		Fota dule		, [88,469.79

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 26 of 53

B6G (Official Form 6G) (12/07)

k Hollis Cripe	e M	In re
		_
		_

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Sheryl A. Long 3237 Mineral Springs Road Sterling, IL 61081

Verizon Box 660108

Dallas, TX 75266-0108

cell phone contract. expires 2/15/15

month to month apartment lease

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 27 of 53

B6H (Official Form 6H) (12/07)

In re	Mark Hollis Cripe	Case No	
-		, Debtor	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

Matt Cripe 26887 Nabour Road Dowagiac, MI 49047

Molly Cripe 4112 Lexington Avenue Gillette, WY 82718

NAME AND ADDRESS OF CREDITOR

Fifth Third Bank 5050 Kingsley Drive 1MOB1N Cincinnati, OH 45263

Wells Fargo Card Services 1 Home Campus 3rd Floor Des Moines, IA 50328

Citibank USA - Sears LVNV Funding, LLC Box 10497 MS576 Greenville, SC 29603

Preferred Customer Account CscI Dispute Team Des Moines, IA 50306

Best Buy Citicorp Credit Services Centralized Bankruptcy Box 20507 Washington, DC 20507

Wyoming Medical Center Accelerated Receivables Solutions Box 70 Scottsbluff, NE 69363

Interal Revenue Service Box 802501 Cincinnati, OH 45280-2501

Internal Revenue Service Box 802501 Cincinnati, OH 45280-2501

Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729

Internal Revenue Service Mail Stop 5010 CHI 230 S. Dearborn St. Chicago, IL 60604 Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 28 of 53

In re	Mark Hollis Cripe		Case No.	
		Debtor		

SCHEDULE H - CODEBTORS (Continuation Sheet)

Molly Cripe
4112 Lexington Avenue
Gillette, WY 82718

NAME AND ADDRESS OF CREDITOR

Attn: Bank
Bankruptcy Dept.
Box 30285
Salt Lake City, UT 84130

Outpatient Radiology
419 S. Washington
Casper, WY 82601

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 29 of 53

							_				
	in this information to otor 1	to identify your ca									
Deb	otor 2 buse, if filing)										
		otcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number								ed filing ent showin	g post-petitior ollowing date:	
<u>O</u>	fficial Form	B 61					Ī	/IM / DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/13
spo atta	use. If you are sep ch a separate she t1: Describ	parated and you let to this form. (lee Employment	are married and not filir r spouse is not filing wi On the top of any additi	th you, do not inc	clude info	rmat	ion abou	t your spo umber (if	ouse. If mo known). A	ore space is	needed,
	information.							□ Empl		iiiig spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed □ Not employe	d			☐ Not e	•		
	employers.		Occupation	sales associa	ite						
	Include part-time self-employed wo		Employer's name	Grummerts H	lardware						
	Occupation may or homemaker, if		Employer's address	424 Locust Sterling, IL 61							
			How long employed t	here? <u>10 m</u>	onths			_			
Par	t 2: Give De	etails About Mor	nthly Income								
spou If yo	mate monthly incurse unless you are	ome as of the da separated.	ate you file this form. If	,	•	•	·			·	J
							For De	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	1	,806.69	\$	N/A	
3.	Estimate and lis	t monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	1,8	06.69	\$	N/A	

Deb	tor 1	Mark Hollis Cripe	•	Case	number (if known)			
	Сор	y line 4 here	4.	For	Debtor 1 1,806.69	For Debto		
5.	List	all payroll deductions:						
0.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	376.86 0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$	376.86	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,429.83	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.+	. <u>\$</u> _	0.00	\$	N/A N/A	
9. 10.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	1,429.83
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your riferends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depen		•	ted in <i>Schedu</i>	ıle J. . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					Combin	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?				montnly	/ income
	•	Yes. Explain: Mark just accepted a job with JJM Printing, and vincome with JJM Printing will increase by \$1.00 a						

gross monthly income of \$2,080.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 31 of 53

Ell in this in					1		
Fill in this info	ormation to identify y	our case:					
Debtor 1	Mark Hollis	Cripe				ck if this is:	
Debtor 2						An amended filing A supplement show	wing post-petition chapter
(Spouse, if filing	ng)					13 expenses as of	
United States I	Bankruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case number							r Debtor 2 because Debtor
(If known)						2 maintains a sepa	rate nousenoid
Official	Form B 6J						
	ıle J: Your	_ Expen	ises				12/1:
Be as comp information.	lete and accurate as	s possible. eded, atta	If two married people ar ch another sheet to this				
	escribe Your House joint case?	ehold					_
	Go to line 2. Does Debtor 2 live	in a separa	ate household?				
	□ No □ Yes. Debtor 2 mu	st file a sep	arate Schedule J.				
2. Do you	have dependents?	□ No					
Do not I Debtor	ist Debtor 1 and 2.	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not s	state the						■ No
depend	ents' names.			Daughter		16	Yes
							□ No
							☐ Yes ☐ No
							☐ Yes
							□ No
							☐ Yes
expens	r expenses include es of people other t If and your depende	han _	No Yes				
Estimate yo	s of a date after the	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followers of the second se	orm as a s J, check t	upplement in a Cha he box at the top o	apter 13 case to report f the form and fill in the
	such assistance an		government assistance i luded it on <i>Schedule I:</i>)			Your exp	enses
	ntal or home owners its and any rent for th		ses for your residence. I	nclude first mortgage	e 4.	\$	187.50
If not in	ncluded in line 4:						
4a. R	teal estate taxes				4a.	\$	0.00
4b. P	roperty, homeowner'	s, or renter	's insurance		4b.		0.00
	lome maintenance, re				4c.	\$	0.00
	lomeowner's associa				4d.		0.00
Additio	nal mortgage paym	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00

6a. S 120.00 6b. Water, sewer, garbage collection 6b. S 111.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 33.00 6d. Other, Specify. Comcast (ftv, internet) 6d. S 60.00 7. Food and housekeeping supplies 7. S 400.00 8. Childcare and children's education costs 8. S 0.00 9. Clothing, laundry, and dry cleaning 9. S 400.00 10. Personal care products and services 10. S 30.00 11. Medical and dental expenses 11. S 40.00 12. Transportation, include gas, maintenance, bus or train fare. 12. S 70.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S 50.00 14. Charitable contributions and religious donations 14. S 0.00 15. Insurance. 15. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S 0.00 15c. Vehicle insurance 55b. S 0.00 15d. Uter insurance. Specify: OBAMA Care 15d. S 177.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify. 17b. S 0.00 17b. Insulament or lease payments: 17c. S 0.00 17c. Care payments for Vehicle 1 17a. S 0.00 17c. Care payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: 17c. S 0.00 17d. Other. Specify: 17d. Other. Specify: 17d. S 0.00 17d. Other. Specify: 17d. Other. Specify: 17d. S 0.00 17d. Other. Specify: 17d. Other. Specify: 17d. S 0.00 17d. Other	Deb	tor 1 Mark Hollis Cripe	Case numl	ber (if known)	
6a. Electricity, heat, natural gas 6b. Water, sewer, gathage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 30.00 6d. Other. Specify: Comcast (tv, Internet) 6d. \$ 60.00 7. Food and housekeeping supplies 7. \$ 400.00 8. Childicare and children's education costs 8. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 40.00 10. Personal care products and services 10. \$ 30.00 11. Personal care products and services 11. \$ 30.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include care payments. 12. \$ 70.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 14. \$ 0.00 15b. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 0.00 15c. Vehicle insurance 15c. \$ 0.00 15d. Other insurance. Specify: OBAMA Care one time OBAMA Care permium (\$500/yr) 17. Installment or lease payments: 17a. Care payments for Vehicle 1 17b. Care payments for Vehicle 1 17c. Care payments for Vehicle 1 17c. Care payments for Vehicle 1 17d. Other. Specify: 17d. Other. Specify: 18t. Specify: 19t. Other insurance, and support that you did not report as deducted from you pay or lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Maintenance, repair, and upkeep expenses 20b. \$ 0.00 20c. Poperty, homeower's, or renter's insurance 20a. Maintenance, repair, and upkeep expenses 20b. \$ 0.00 20c. Property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Maintenance, repair, and upkeep expenses 20c. Property, bromeower's, or renter's insurance 20a. Sq. 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property own monthly expenses from line 22 above. 21d. Other: Specify: 21	6	Utilities:			
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Comcast (tv, Internet) 6d. Specify: Comcast (tv, In	٥.		6a.	\$	120.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Comcast (tv, internet) 6d. \$ 60.\$ 6d. \$ 60.00 7. Food and housekeeping supplies 7. \$ 400.00 8. Childcare and children's education costs 8. \$ 0.00 10. Personal care products and services 10. \$ 30.00 11. Medical and dental expenses 11. \$ 40.00 12. Transportation, Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15s. Life insurance 15b. 40.00 15c. Vehicle insurance 15c. \$ 0.00 15d. Other insurance, Specify: OBAMA Care one time OBAMA Care permium (\$500/yr) 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Left of the insurance from your pay or included in lines 4 or 20. 15c. Tothicle insurance, Specify: OBAMA Care one time OBAMA Care permium (\$500/yr) 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17c. Other insurance. 17d. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 17e. Other. Specify: 17d. S 0.00 17e. Other. Specify		6b. Water, sewer, garbage collection	6b.	\$	
6d. Other. Specify: Comcast (tv, internet) 6. Food and housekeeping supplies 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Childcare and children's education costs 9. S. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 40.00 10. \$ 30.00 11. Medical and dental expenses 11. \$ 40.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 70.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: OBAMA Care 15d. Other insurance. Specify: OBAMA Care 15d. Other insurance. Specify: OBAMA Care 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15n. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 190. Other payments of allinonry, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19. Other specify: 19. Other payments on the property of the swin of the with you. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, epair, and upkeep expenses 20d. \$ 0.00 20d. Main		6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
Food and housekeeping supplies 7. \$ 400.00		6d. Other. Specify: Comcast (tv, internet)	6d.	\$	
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 40.00 10. Personal care products and services 11. \$ 40.00 11. Medical and dental expenses 11. \$ 40.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$ 70.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 0.00 15c. Vehicle insurance. 15d. Other insurance. Specify: 0 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 17d. Other. Specify: 17d. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. Other. Specify: 17d. \$ 0.00 17d.	7.		7.	\$	
Clothing, laundry, and dry cleaning 9. \$ 40.00	8.	Childcare and children's education costs	8.	\$	
10. S 30.00	9.	Clothing, laundry, and dry cleaning	9.	\$	
12 \$ \$ \$ \$ \$ \$ \$ \$ \$	10.	Personal care products and services	10.	\$	
Do not include car payments. 12. \$ 70.00 13. Entertainment, clube, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: OBAMA Care 15d. Other insurance. Specify: OBAMA Care 15d. Other insurance. Specify: OBAMA Care 15d. Other insurance. Specify: OBAMA Care premium (\$500/yr) 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 6I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Waintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Vour monthly expenses. Add lines 4 through 21. The result is your monthly income income. 21a. Copy inne 12 (your combined monthly income) from Schedule I. 21a. Subtract your monthly expenses from line 22 above. 22b. Subtract your monthly expenses from your monthly income.	11.	Medical and dental expenses	11.	\$	40.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: OBAMA Care premium (\$500lyr) 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Other. Specify: OBAMA Care premium (\$500lyr) 17d. Other. Specify: Other. Specify: OBAMA Care premium (\$500lyr) 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18. \$ 200.00 19d. Other payments you make to support others who do not live with you. \$ 0.00 Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20a. Mortgages on other property 20b. Real estate taxes 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Other insurance taxes of the property of the property of t	12.	Transportation. Include gas, maintenance, bus or train fare.			
14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Lefalth insurance 15b. S 0.00 15c. Vehicle insurance. Specify: OBAMA Care 15c. S 0.00 15c. Vehicle insurance. Specify: OBAMA Care 15c. S 0.00 15d. Other insurance. Specify: OBAMA Care 15c. S 0.00 15d. Other insurance. Specify: OBAMA Care 15c. S 0.00 15d. Other insurance. Specify: OBAMA Care 15c. S 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. S 0.00 17a. Car payments for Vehicle 1 17a. S 0.00 17b. Car payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: 17c. S 0.00 17c. Other. Specify: 17c. S 0.00 17d. Other. Specify: 17d. S 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). S 0.00 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 30.00 20e. Homeowner's association or condominium dues 20e. S 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. S 1,429.83 23b. Copy your monthly expenses from line 22 above. 23b\$ 1,387.17				·	
15. Insurance					
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Other insurance other insurance of 15c. \$ 0.000 15d. Other insurance. Specify: Other insurance other insurance of 15c. \$ 0.000 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. \$ 0.000 17b. Car payments for Vehicle 2 17b. \$ 0.000 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.000 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.000 20d. Maintenance, repair, and upkeep expenses 20d. \$ 30.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 30.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.	14.	Charitable contributions and religious donations	14.	\$	0.00
15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: OBAMA Care	15.				
15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: OBAMA Care			150	¢	0.00
15c. Vehicle insurance 15d. Other insurance. Specify: OBAMA Care 15d. \$ 17.00 one time OBAMA Care premium (\$500/yr) \$ 41.67 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 one time OBAMA Care premium (\$500/yr) \$ 16. \$ 0.00 one time OBAMA Care premium (\$500/yr) \$ 16. \$ 0.00 one time OBAMA Care premium (\$500/yr) \$ 16. \$ 0.00 one of the care payments of vehicle 1				·	
15d. Other insurance. Specify: OBAMA Care one time OBAMA Care premium (\$500/yr) \$ 41.67 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18. \$ 200.00 19. Other payments you make to support others who do not live with you. \$ 0.00 Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 30.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. 22. \$ 1,387.17 The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,429.83 23b. Copy your monthly expenses from line 22 above. 23b\$ 1,387.17				·	
Taxes				·	
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6i). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Subtract your monthly expenses from your monthly income.			13u.	·	
Specify:	16			Ψ	41.67
17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18. \$ 200.00 19. Other payments you make to support others who do not live with you. \$ 0.00 Specify: 19. 19. 20. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 30.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. 22. \$ 1,387.17 The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,429.83 23b. Copy your monthly expenses from line 22 above. 23b\$ 1,387.17 <td></td> <td>Specify:</td> <td> 16.</td> <td>\$</td> <td>0.00</td>		Specify:	16.	\$	0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. \$ 0.00 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 30.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,429.83 23b. Copy your monthly expenses from your monthly income.	17.			_	
17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Specify: 18deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19deducted from your Income. 20a. Montgages on other property 20a. Specify: 20a. Specify: 20a. Specify: 20b. Specify: 20c. Speci				·	
17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.		• •			
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 30.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23a. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,429.83 23b. Copy your monthly expenses from line 22 above.				·	
deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23b. Subtract your monthly expenses from your monthly income.		• • •		\$	0.00
19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.	18.		s 18.	\$	200.00
Specify:	19.				
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 240. \$ 1,429.83 23c. Subtract your monthly expenses from your monthly income.			19.	<u> </u>	0.00
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 30.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.	20.			our Income.	
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.					0.00
20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Specify: Matt Cripe 21. Other: Specify: Matt Cripe 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.		20b. Real estate taxes	20b.	\$	0.00
20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Matt Cripe 21. +\$ 60.00 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.		20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
21. Other: Specify: Matt Cripe 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.		20d. Maintenance, repair, and upkeep expenses	20d.	\$	30.00
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.		20e. Homeowner's association or condominium dues	20e.	\$	0.00
The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.	21.	Other: Specify: Matt Cripe	21.	+\$	60.00
The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.	22.	Your monthly expenses. Add lines 4 through 21.	22.	\$	1,387.17
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,429.83 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.					
23b. Copy your monthly expenses from line 22 above. 23b\$ 1,387.17	23.				
23c. Subtract your monthly expenses from your monthly income.				·	
		23b. Copy your monthly expenses from line 22 above.	23b.	-\$	1,387.17
The result is your <i>monthly net income</i> .			225	¢	42 66
		The result is your monthly net income.	∠3C.	Ψ	72.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

□ No.

Yes. Explain:

Mark's child support obligation was set at \$400 a mo. but 1 child turned 18 and therefore Mark believes child support is now \$200 a month.Mark believes his ex-wife is willing to take less but such agreement has not been reduced to a written court order upon the ex-wife's request.In addition, Mark will be moving in the next month, and his rent will increase to \$250.00 a month. Mark hopes to purchase a vehicle and make monthly payments.Mark hopes to work out a pay agreement with the IRS.

B6 Declaration (Official Form 6 - Declaration). (12/07)

Document

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Page 33 of 53

> **United States Bankruptcy Court Northern District of Illinois**

In re	Mark Hollis Cripe		Case No.	
		Debtor(s)	Chapter	7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

	DECLARATION UNI	DER PENALTY (OF PERJURY BY INDIVIDUAL DEBTOR	
	I declare under penalty of persheets, and that they are true and correct		ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief.	27
Date	February 6, 2015	Signature	/s/ Mark Hollis Cripe Mark Hollis Cripe Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 34 of 53

B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

In re	Mark Hollis Cripe		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\$15,443.52	2014 income from Grummerts Hardware
\$35,902.00	2013 income
\$1,810.88	2014 (through 8/24/14) from Al & Leda's Pizzeria
\$1.418.07	2015 income to date (Grummerts)

SOURCE

AMOUNT

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 35 of 53

B7 (Official Form 7) (04/13)

2

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	DATES OF PAYMENTS/	AMOUNT PAID OR VALUE OF	AMOUNT STILL
NAME AND ADDRESS OF CREDITOR	TRANSFERS	TRANSFERS	OWING

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND AMOUNT STILL DATE OF PAYMENT AMOUNT PAID RELATIONSHIP TO DEBTOR **OWING** Fifth Third Bank Feb - Aug 2014 \$1,825.99 \$8,447.90 5050 Kingsley Drive 1MOB1N \$260.77/month, Nov. \$50 Cincinnati, OH 45263 \$1,837.32 **Dowagiac Area Federal Credit Union** Feb. - August 2014 \$8,296.41 (\$262.46) Nov. \$50 473 E. Division Street Dowagiac, MI 49047

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER **PROCEEDING** AND LOCATION DISPOSITION Law & Courts Building, 60296 M-62, Cripe v. Cripe 2014-228-DO Dissolution of Judgment for Marriage Cassopolis, MI 49031 Dissolution entered

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 36 of 53

B7 (Official Form 7) (04/13)

N.T

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER Wells Fargo Dealer Service

Wells Fargo Dealer Services Box 25341 Santa Ana, CA 92799-5341 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN May 10, 2014

DESCRIPTION AND VALUE OF PROPERTY 2012 Jeep Wrangler

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT

CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 37 of 53

B7 (Official Form 7) (04/13)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

credit counseling

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 12/1/14, Debtor

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Ehrmann Gehlbach Badger & Lee, LLC 215 E. First Street P.O. Box 447 Dixon, IL 61021

1/5/2015, debor

\$40

\$1,000

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

Kelly D. Mulanax

12/31/13

House sold on 616 W. 10th Street, Casper, WY.

This was a short sale.

none

None

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 38 of 53

B7 (Official Form 7) (04/13)

5

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 26887 Nubour Road, Dowaglac, MI 49047 723 Broadway Avenue, Sterling, IL 61081 616 W. 10th Street, Casper, WY NAME USED
Mark H. Cripe
Mark H. Cripe
Mark H. Cripe

DATES OF OCCUPANCY 12/1/2013 - 3/15/2014 3/16/2014 - 9/1/2014 6/2012 - 12/2012

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Sue Wiltse Cripe

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE ENVIRONMENTAL

ERNMENTAL UNIT NOTICE LA

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 39 of 53

B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS LAW

GOVERNMENTAL UNIT NOTICE

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF DOCKET NUMBER STATUS OR DISPOSITION GOVERNMENTAL UNIT

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

BEGINNING AND (ITIN)/ COMPLETE EIN ADDRESS NATURE OF BUSINESS **ENDING DATES**

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 40 of 53

B7 (Official Form 7) (04/13)

ADDRESS NAME

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was None

issued by the debtor within two years immediately preceding the commencement of this case.

INVENTORY SUPERVISOR

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS AMOUNT OF MONEY DATE AND PURPOSE OF RECIPIENT, OR DESCRIPTION AND OF WITHDRAWAL RELATIONSHIP TO DEBTOR VALUE OF PROPERTY

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 41 of 53

B7 (Official Form 7) (04/13)

Q.

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date February 6, 2015

Signature /s/ Mark Hollis Cripe

Mark Hollis Cripe

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 42 of 53

B8 (Form 8) (12/08)

United States Bankruptcy CourtNorthern District of Illinois

In re Mark Hollis Cripe	1 (02 02102 22 22	, 	Case No.	
<u> </u>	I	Debtor(s)	Chapter	7
CHAPTER 7 IN PART A - Debts secured by property of the estate. Attach		nust be fully comp		
Property No. 1				
Creditor's Name: Wfs Financial/Wachovia Dealer Srvs		Describe Property Securing Debt: 2012 Toyota RAV4 (joint with exwife. Ex-wife has possession. She filed her own chapter 7 bankruptcy peition and reaffirmed this debt.)		
Property will be (check one):				
■ Surrendered	☐ Retained			
If retaining the property, I intend to (check ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain Property is (check one): ■ Claimed as Exempt		oid lien using 11 U.S □ Not claimed as		
PART B - Personal property subject to une Attach additional pages if necessary.) Property No. 1	expired leases. (All three			ed for each unexpired lease.
Lessor's Name: Sheryl A. Long	Describe Leased Promonth to month apa		Lease will b U.S.C. § 365 □ YES	e Assumed pursuant to 11 5(p)(2): NO
Property No. 2			1	
Lessor's Name: Verizon	Describe Leased Procell phone contract.		Lease will b U.S.C. § 365	

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 43 of 53

Page 2

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	February 6, 2015	Signature	/s/ Mark Hollis Cripe	
			Mark Hollis Cripe	
			Debtor	

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 44 of 53

United States Bankruptcy Court Northern District of Illinois

In r	e Mark Hollis Cripe		Case No.		
	•	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSAT	TION OF ATTO	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I paid to me within one year before the filing of the petition in ba behalf of the debtor(s) in contemplation of or in connection with	nkruptcy, or agreed to b	e paid to me, for se		
	For legal services, I have agreed to accept			1,000.00	
	Prior to the filing of this statement I have received			1,000.00	
	Balance Due			0.00	
2.	\$ 335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensation	n with any other person	unless they are mer	mbers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensation we copy of the agreement, together with a list of the names of t				law firm. A
6.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspect	ts of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rendering ad b. Preparation and filing of any petition, schedules, statement of c. Representation of the debtor at the meeting of creditors and d. Representation of the debtor in adversary proceedings and of e. [Other provisions as needed] 	of affairs and plan which confirmation hearing, a	n may be required; nd any adjourned he	-	ıkruptcy;
7.	By agreement with the debtor(s), the above-disclosed fee does r	not include the following	g service:		
	CER	RTIFICATION			
this	I certify that the foregoing is a complete statement of any agreed bankruptcy proceeding.	ment or arrangement for	payment to me for	representation of the	debtor(s) in
Date	ed: February 6, 2015	/s/ Megan G. Hee	g		
		Megan G. Heeg Ehrmann Gehlba 215 E. First Stree P.O. Box 447		Considine, LLC	
		Dixon, IL 61021 815-288-4949 Fa heeg@egblc.com			

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 46 of 53

Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Page 47 of 53 Document

B 201B (Form 201B) (12/09)

United States Bankruptcy Court

		thern District of Illinois		
In re	Mark Hollis Cripe		Case No.	
	•	Debtor(s)	Chapter	7
	CERTIFICATION OF I UNDER § 342(b)	NOTICE TO CONSUM OF THE BANKRUPTO	`	S)
Code.	Ce I (We), the debtor(s), affirm that I (we) have rec	ertification of Debtor eived and read the attached no	otice, as required by	§ 342(b) of the Bankruptcy
Mark I	Hollis Cripe	X /s/ Mark Hollis	Cripe	February 6, 2015
Printe	d Name(s) of Debtor(s)	Signature of De	ebtor	Date
Case N	No. (if known)	X		
		Signature of Jo	int Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. \S 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Case 15-80295 Doc 1 Filed 02/06/15 Entered 02/06/15 15:22:36 Desc Main Document Page 48 of 53

United States Bankruptcy Court Northern District of Illinois

In re	Mark Hollis Cripe		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	1ATRIX	
	· -			
		Number of	Creditors:	48
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of credi	tors is true and cor	rect to the best of my

American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355

Bank of America Unit/CA6-919-02-41 Po Box 5170 Simi Valley, CA 93062

Bank of America N.A. Resurgent Capital Services Box 19034 Greenville, SC 29602

Best Buy Citicorp Credit Services Centralized Bankruptcy Box 20507 Washington, DC 20507

Cap1/bstby 1405 Foulk Road Wilmington, DE 19808

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital 1 Bank Attn: Bankruptcy Dept. Box 30285 Salt Lake City, UT 84130

Cashcall Inc 1 City Blvd W Orange, CA 92868

Casper Medical Imaging 419 S. Washington Casper, WY 82601

Chase 201 N. Walnut St//De1-1027 Wilmington, DE 19801

Chase auto
Attn: National Bankruptcy Dept
Po Box 29505
Phoenix, AZ 85038

Chase Cardmember Service Box 94014 Palatine, IL 60094

Chase-pier1 Chase Card Svcs/Attn:Bankruptcy Dept Po Box 15298 Wilmington, DE 19850

Citibank USA - Sears LVNV Funding, LLC Box 10497 MS576 Greenville, SC 29603

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218

Credit One Bank Po Box 98873 Las Vegas, NV 89193

Delbert Services/consu Rodney Square N 1100 N M Wilmington, DE 18901

Discoverbank Po Box 15316 Wilmington, DE 19850

Dowagiac Area Fcu 473 E Division St Dowagiac, MI 49047

Dsnb Macys Po Box 8218 Mason, OH 45040 Fifth Third Bank 5050 Kingsley Drive 1MOB1N Cincinnati, OH 45263

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

GECRB/Care Credit Attn: Bankruptcy Box 103014 Roswell, GA 30076

GECRB/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076

Interal Revenue Service Box 802501 Cincinnati, OH 45280-2501

Internal Revenue Service Box 802501 Cincinnati, OH 45280-2501

Internal Revenue Service Mail Stop 5010 CHI 230 S. Dearborn St. Chicago, IL 60604

John F. Magyar, Esq. 107 Pennsylvania Avenue Box 502 Dowagiac, MI 49047

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Matt Cripe 26887 Nabour Road Dowagiac, MI 49047 Molly Cripe 4112 Lexington Avenue Gillette, WY 82718

Nationstar Mortgage LLC Attn: Bankruptcy 350 Highland Dr Lewisville, TX 75067

Outpatient Radiology 419 S. Washington Casper, WY 82601

Peoples Bk Credit Card Services Attn: Bankruptcy Po Box 7092 Bridgeport, CT 06601

Preferred Customer Account Cscl Dispute Team Des Moines, IA 50306

Sheryl A. Long 3237 Mineral Springs Road Sterling, IL 61081

Sue Cripe 48 Paseo Primero Rancho Santa Margarita, CA 92688

Verizon Box 660108 Dallas, TX 75266-0108

Wells Fargo Po Box 60510 Los Angeles, CA 90060

Wells Fargo Box 25341 Santa Ana, CA 92799-5341 Wells Fargo Card Ser 1 Home Campus 3rd Floor Des Moines, IA 50328

Wells Fargo Card Services 1 Home Campus 3rd Floor Des Moines, IA 50328

Wells Fargo Card Services Box 6412 Carol Stream, IL 60197-6412

Wells Fargo Dealer Services Box 25341 Santa Ana, CA 92799-5341

Wells Fargo National Bank 800 Walnut Street Des Moines, IA 50309

Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729

Wyoming Medical Center Accelerated Receivables Solutions Box 70 Scottsbluff, NE 69363

Zales/Sterling Jewelers Attn.: Bankruptcy Po Box 1799 Akron, OH 43309